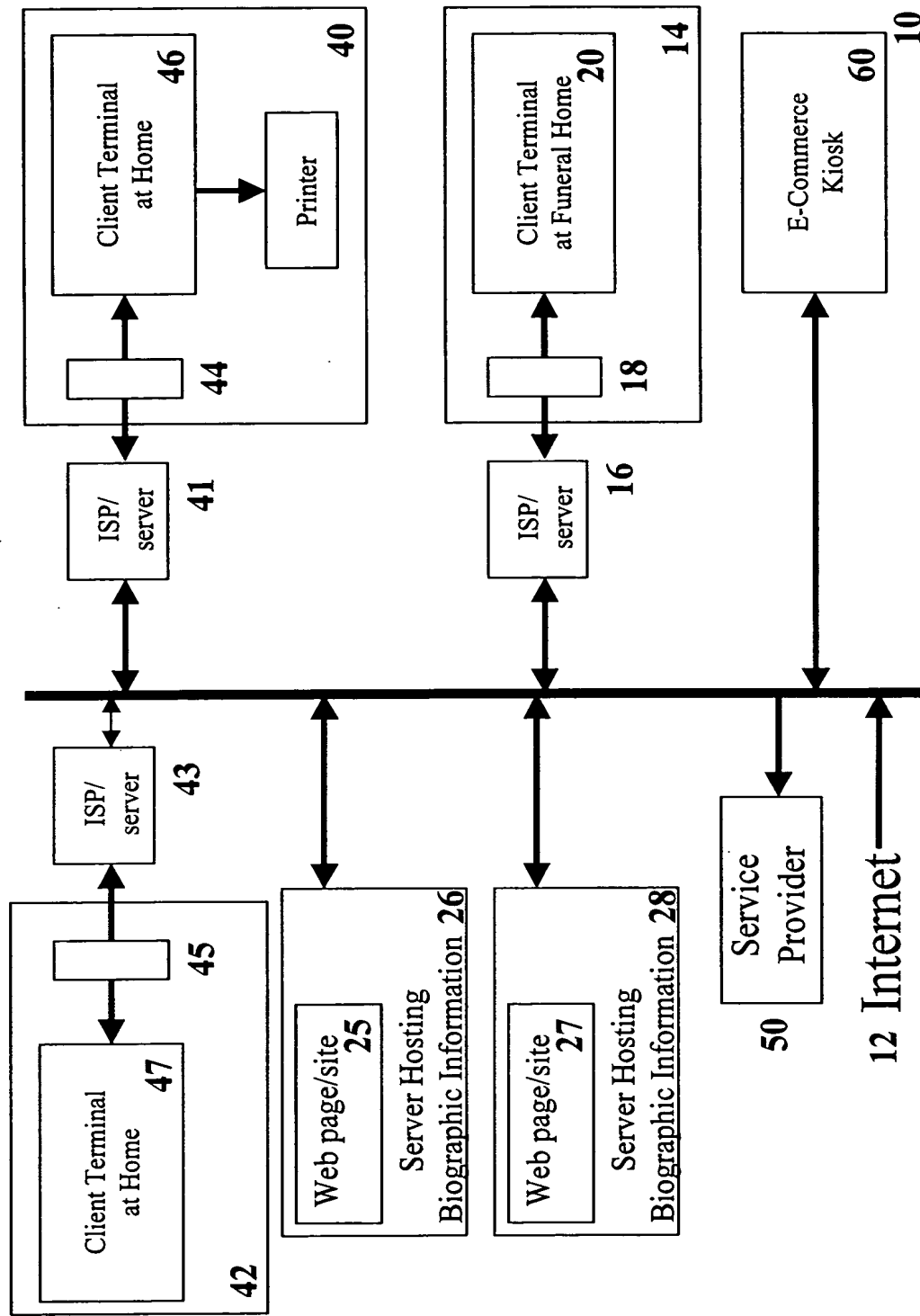


Figure 1



**Figure 2**

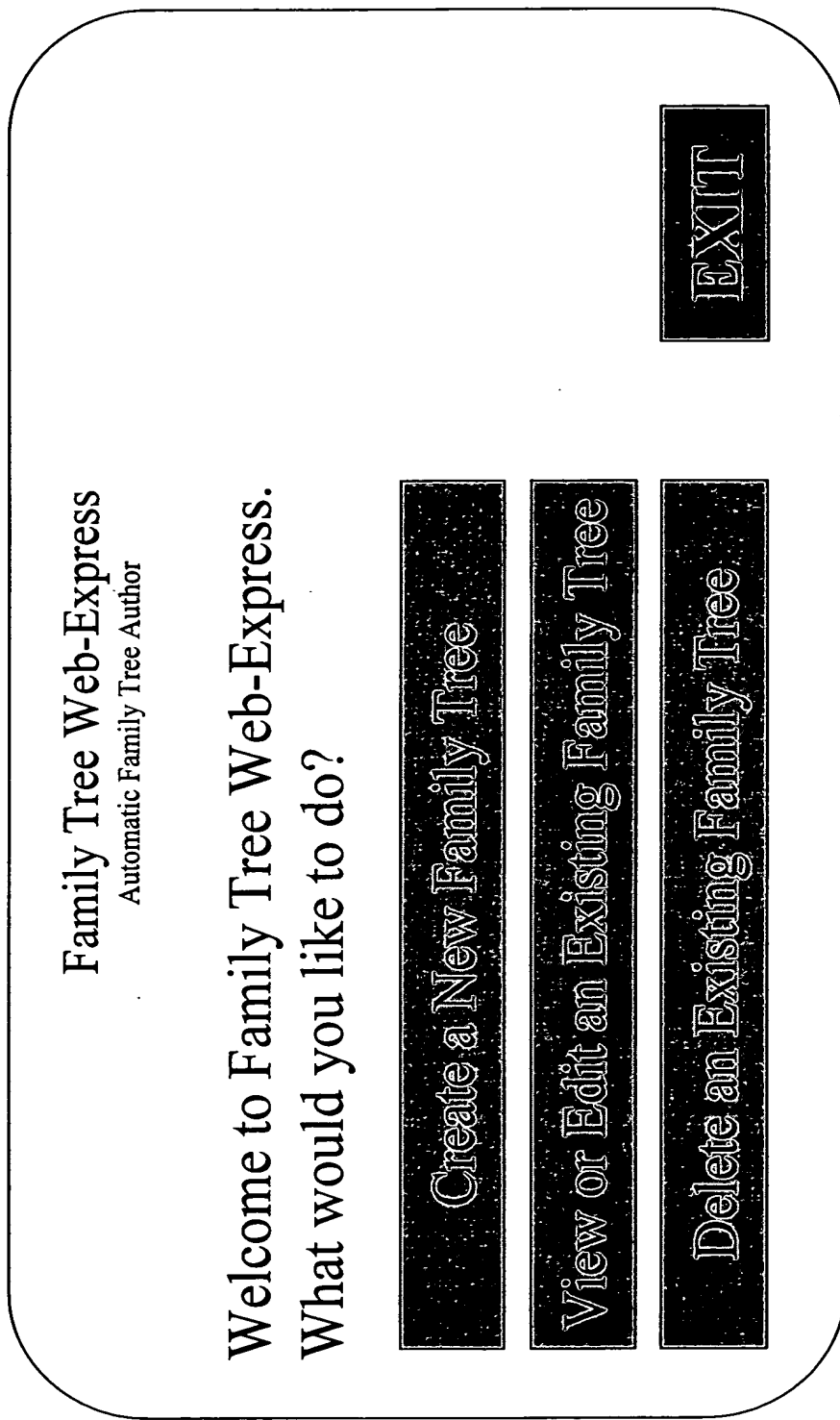


Figure 3

**Family Tree Web-Express**  
Automatic Family Tree Author

**Individual**

First Name  Middle Name or Initial  Last Name  Gender ☐ F ☐ M

Date of Birth  Place of Birth  Date of Death, if deceased  Place of Death, if deceased

**Relatives of the Individual**

First Name  Middle Name or Initial  Last Name  Gender ☐ F ☐ M

Date of Birth  Place of Birth  Date of Death, if deceased  Place of Death, if deceased

First Name  Middle Name or Initial  Last Name  Gender ☐ F ☐ M

Date of Birth  Place of Birth  Date of Death, if deceased  Place of Death, if deceased

Relationship

First Name  Middle Name or Initial  Last Name  Gender ☐ F ☐ M

Date of Birth  Place of Birth  Date of Death, if deceased  Place of Death, if deceased

Relationship

UPDATE

MORE INPUT

RETURN TO MAIN MENU

EXIT

140

Figure 4

**Family Tree Web-Express**  
Automatic Family Tree Author

First Name	<input type="text"/>	Middle Name/Initial	<input type="text"/>	Last Name	<input type="text"/>	Probable Relationship	<input type="text"/>
Date of Birth	<input type="text"/>	Place of Birth	<input type="text"/>	Date of Death, if deceased	<input type="text"/>	Place of Death, if deceased	<input type="text"/>
Accuracy Rating	<input type="text"/>	<a href="#">Click here for more information about this individual</a>				Accept?	<input type="radio"/> Y <input type="radio"/> N
First Name	<input type="text"/>	Middle Name/Initial	<input type="text"/>	Last Name	<input type="text"/>	Probable Relationship	<input type="text"/>
Date of Birth	<input type="text"/>	Place of Birth	<input type="text"/>	Date of Death, if deceased	<input type="text"/>	Place of Death, if deceased	<input type="text"/>
Accuracy Rating	<input type="text"/>	<a href="#">Click here for more information about this individual</a>				Accept?	<input type="radio"/> Y <input type="radio"/> N
First Name	<input type="text"/>	Middle Name/Initial	<input type="text"/>	Last Name	<input type="text"/>	Probable Relationship	<input type="text"/>
Date of Birth	<input type="text"/>	Place of Birth	<input type="text"/>	Date of Death, if deceased	<input type="text"/>	Place of Death, if deceased	<input type="text"/>
Accuracy Rating	<input type="text"/>	<a href="#">Click here for more information about this individual</a>				Accept?	<input type="radio"/> Y <input type="radio"/> N
<a href="#">UPDATE</a>							<a href="#">RETURN TO MAIN MENU</a>
<a href="#">MORE INPUT</a>							<a href="#">EXIT</a>

Figure 5

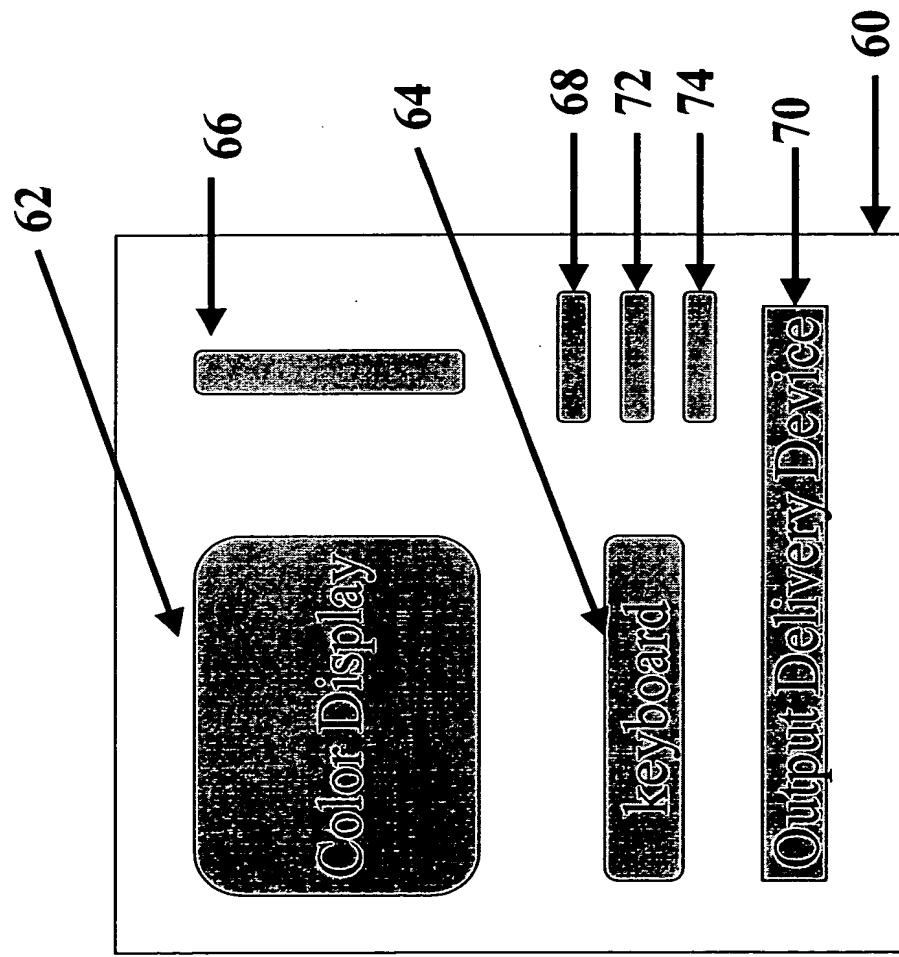


Figure 6

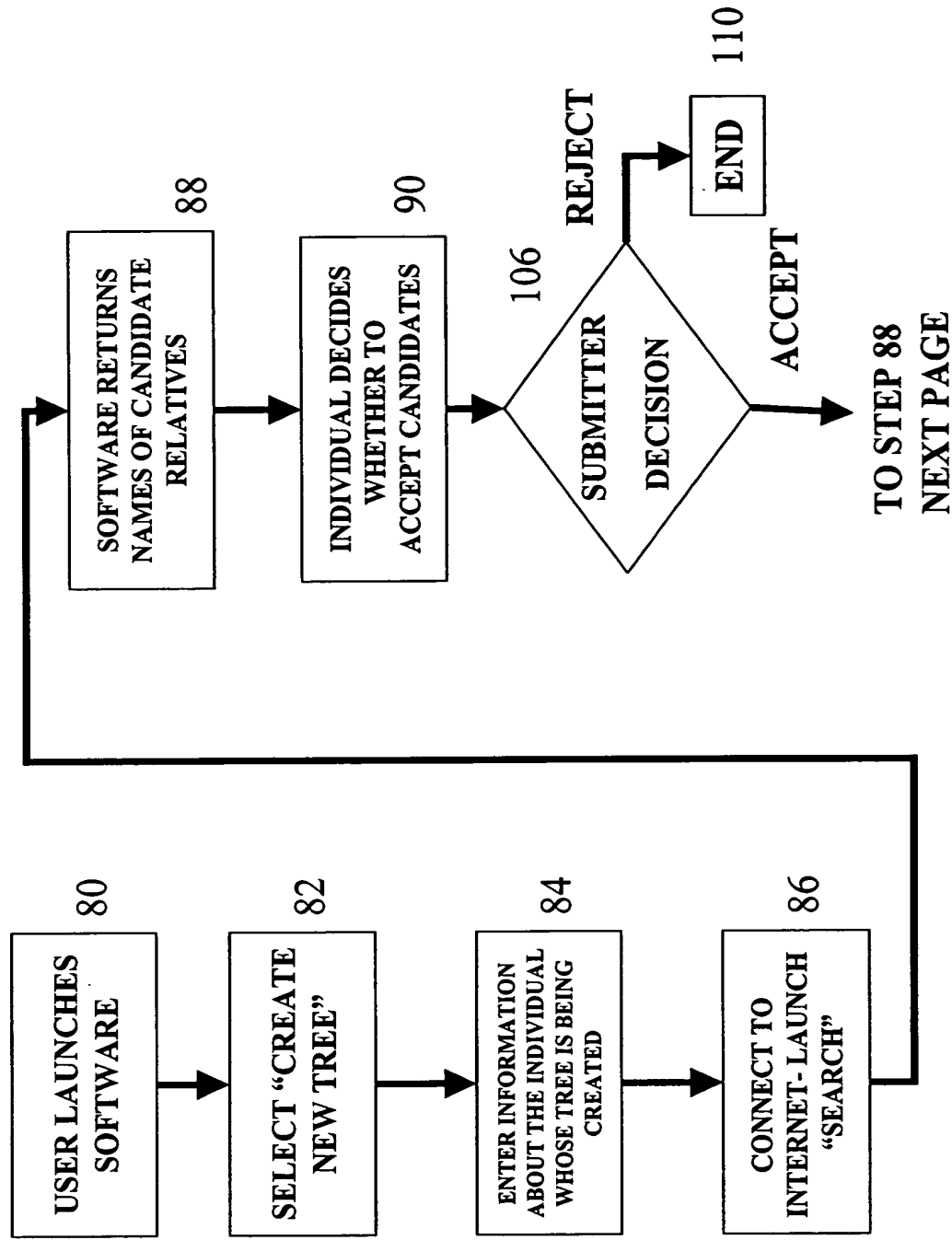


Figure 7

